

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8785	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Rene D Ciudad Real P.O. Box, Bldg., Room No., if any Street 297 N Marengo Avenue City Pasadena State California ZIP Code + 4 91101	4. Name, file number, and address of labor organization. Name Painters AFL-CIO DC 36 Labor Organization File Number 030-396 P.O. Box, Building and Room Number, if any Suite 120 Street 297 N Marengo Avenue City Pasadena State California ZIP Code + 4 91101
5. Position in labor organization. Business Representative	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed	On 08/12/2005 Date	(626) 584-9925 Telephone Number

Name of Person Filing Rene Ciudad Real	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>SCPD Labor Management Cooperation Committee</u></p> <p>Trade Name, if any: <u>So Cal Painters and Decorations LMC</u></p> <p>P.O. Box, Bldg., Room No., if any <u>Suite 103</u></p> <p>Street <u>297 N Marengo Avenue</u></p> <p>City <u>Pasadena</u></p> <p>State <u>California</u> ZIP Code + 4 <u>91101</u></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input checked="" type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Los Angeles Paint Finishing Contractor Assoc</u></p> <p>Trade Name, if any: <u>LAP & FCA</u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>1106 Colorado Blvd.</u></p> <p>City <u>Los Angeles</u></p> <p>State <u>California</u> ZIP Code + 4 <u>90041</u></p>	<p>11.a. Nature of such dealing.</p> <p>The LMCC is a jointly administered labor and management fund established under the terms of the Collective Bargaining Agreement. The LMCC arbitrates disputes and issues interpretations of the Agreement.</p> <p>11.b. Approximate dollar value of such dealing. <u>\$0</u></p> <p>12.a. Nature of interest held or income received.</p> <p>Two tickets to the LAP & FCA holiday dinner on November 9, 2004.</p> <p>12.b. Amount. <u>\$70</u></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>14.a. Nature of payment.</p> <p><u></u></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <p><u></u></p>

Rene Real

Reporting period ending December 31, 2004

DISCLAIMER

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing, or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will file an amended Form LM-30.